

E-filing

FILED

JUL 11 2008

RICHARD W. WIEKING
CLERK, U.S. DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

Henry wilds

Plaintiff,

vs.

Donald Gines et al.

Defendant.

CV 08

3348

CW

(PR)

CASE NO. _____

PRISONER'S
APPLICATION TO PROCEED
IN FORMA PAUPERIS

I, Henry wilds, declare, under penalty of perjury that I am the plaintiff in

the above entitled case and that the information I offer throughout this application is true and correct.

I offer this application in support of my request to proceed without being required to prepay the full amount of fees, costs or give security. I state that because of my poverty I am unable to pay the costs of this action or give security, and that I believe that I am entitled to relief.

In support of this application, I provide the following information:

1. Are you presently employed? Yes ___ No X

If your answer is "yes," state both your gross and net salary or wages per month, and give the name and address of your employer:

Gross: _____ Net: _____

Employer: _____

If the answer is "no," state the date of last employment and the amount of the gross and net salary

1 and wages per month which you received. (If you are imprisoned, specify the last place of
2 employment prior to imprisonment.)

3 _____
4 _____
5 _____
6 2. Have you received, within the past twelve (12) months, any money from any of the following
7 sources:

8 a. Business, Profession or Yes ____ No X
9 self employment

10 b. Income from stocks, bonds, Yes ____ No X
11 or royalties?

12 c. Rent payments? Yes ____ No X

13 d. Pensions, annuities, or Yes ____ No X
14 life insurance payments?

15 e. Federal or State welfare payments, Yes ____ No X
16 Social Security or other govern-
17 ment source?

18 If the answer is "yes" to any of the above, describe each source of money and state the amount
19 received from each.

20 _____
21 _____
22 3. Are you married? Yes ____ No X

23 Spouse's Full Name: _____

24 Spouse's Place of Employment: _____

25 Spouse's Monthly Salary, Wages or Income:

26 Gross \$ _____ Net \$ _____

27 4. a. List amount you contribute to your spouse's support: \$ _____

28 b. List the persons other than your spouse who are dependent upon you for support

1 and indicate how much you contribute toward their support. (NOTE: For minor
2 children, list only their initials and ages. DO NOT INCLUDE THEIR NAMES.).

3 _____
4 _____
5 5. Do you own or are you buying a home? Yes ___ No X

6 Estimated Market Value: \$ _____ Amount of Mortgage: \$ _____

7 6. Do you own an automobile? Yes ___ No X

8 Make _____ Year _____ Model _____

9 Is it financed? Yes ___ No ___ If so, Total due: \$ _____

10 Monthly Payment: \$ _____

11 7. Do you have a bank account? Yes ___ No X (Do not include account numbers.)

12 Name(s) and address(es) of bank: _____

13 _____

14 Present balance(s): \$ _____

15 Do you own any cash? Yes ___ No X Amount: \$ _____

16 Do you have any other assets? (If "yes," provide a description of each asset and its estimated
17 market value.) Yes ___ No X

18 _____

19 8. What are your monthly expenses?

20 Rent: \$ _____ Utilities: _____

21 Food: \$ _____ Clothing: _____

22 Charge Accounts:

23 Name of Account Monthly Payment Total Owed on This Acct.

24 _____ \$ _____ \$ _____

25 _____ \$ _____ \$ _____

26 _____ \$ _____ \$ _____

27 9. Do you have any other debts? (List current obligations, indicating amounts and to whom
28 they are payable. Do not include account numbers.)

10. Does the complaint which you are seeking to file raise claims that have been presented in other lawsuits? Yes ___ No X

Please list the case name(s) and number(s) of the prior lawsuit(s), and the name of the court in which they were filed.

I consent to prison officials withdrawing from my trust account and paying to the court the initial partial filing fee and all installment payments required by the court.

I declare under the penalty of perjury that the foregoing is true and correct and understand that a false statement herein may result in the dismissal of my claims.

6-4-08

DATE

Henry W. White

SIGNATURE OF APPLICANT

Case Number: _____

CERTIFICATE OF FUNDS

IN

PRISONER'S ACCOUNT

I certify that attached hereto is a true and correct copy of the prisoner's trust account statement showing transactions of

Wilds, Henry for the last six months at
[prisoner name]

CTF Soledad where (s)he is confined.
[name of institution]

I further certify that the average deposits each month to this prisoner's account for the most recent 6-month period were \$ 7.34 and the average balance in the prisoner's account each month for the most recent 6-month period was \$ 13.52

Dated: 7-7-08

Yolande Chang
Authorized officer of the institution
Acct. 1 Spec.

Correctional Training Institute
P. O. Box 686
16 Miles N of Soledad on 101
Soledad, California 95072

ATTN: Trust Office



THE WITHIN INSTRUMENT IS A CORRECT
COPY OF THE TRUST ACCOUNT MAINTAINED
BY THIS OFFICE.

ATTEST: 7/7/08

CALIFORNIA DEPARTMENT OF CORRECTIONS

BY Yolande Chang

TRUST OFFICE
Acct. 1 Spec.

REPORT ID: TS3030 .701 REPORT DATE: 07/07/08 PAGE NO: 1

CALIFORNIA DEPARTMENT OF CORRECTIONS
CTF SOLEDAD/TRUST ACCOUNTING
INMATE TRUST ACCOUNTING SYSTEM
INMATE TRUST ACCOUNT STATEMENT

FOR THE PERIOD: FEB. 08, 2008 THRU JUL. 07, 2008

ACCOUNT NUMBER : E55595 BED/CELL NUMBER: CFBWT1000000113L
ACCOUNT NAME : WILDS, HENRY ACCOUNT TYPE: I
PRIVILEGE GROUP: A

TRUST ACCOUNT ACTIVITY

DATE	TRAN	DESCRIPTION	COMMENT	CHECK NUM	DEPOSITS	WITHDRAWALS	BALANCE
02/08/2008		BEGINNING BALANCE					16.27
02/19	W515	COPY CHARGE	2640 MCOPI			10.40	5.87
03/06	D554	INMATE PAYROL	2855 P1		14.67		20.54
03/08	W515	COPY CHARGE	2920 MCOPI			4.20	16.34
03/20	W514	VISION CARE C	3061 OPTIC			16.34	0.00
04/04	D554	INMATE PAYROL	3156 P2		11.84		11.84
04/09	W512	LEGAL POSTAGE	3287 LPOST			0.97	10.87
05/06	D554	INMATE PAYROL	3626 P18		15.34		26.21
07/03	D554	INMATE PAYROL	0031 P21		2.17		28.38

CURRENT HOLDS IN EFFECT

DATE	HOLD	DESCRIPTION	COMMENT	HOLD AMOUNT
04/23/2008	H102	EYEGLASSES HOLD	3494 OPTIC	41.50
05/01/2008	H110	COPIES HOLD	3608 MCOPI	0.10
07/01/2008	H110	COPIES HOLD	0002 MCOPI	1.20

TRUST ACCOUNT SUMMARY

BEGINNING	TOTAL	TOTAL	CURRENT	HOLDS	TRANSACTIONS
BALANCE	DEPOSITS	WITHDRAWALS	BALANCE	BALANCE	TO BE POSTED
16.27	44.02	31.91	28.38	42.80	0.00

CURRENT
AVAILABLE
BALANCE

14.42-

Correctional Training Facility

Box 800
2000 N of Soledad St. 94061
Soledad, California 94061

ATTN: Trust Office



THE WITHIN INSTRUMENT IS A CORRECT
COPY OF THE TRUST ACCOUNT MAINTAINED
BY THIS OFFICE.

ATTEST: 7/7/08

CALIFORNIA DEPARTMENT OF CORRECTIONS

BY *Blanca Chang*
TRUST OFFICE *Acct. 1 Spa.*